

REPUBLIC OF THE PHILIPPINES
Philippine Health Insurance Corporation
 709 CityState Center Bldg.
 Shaw Blvd. Brgy. Oranbo, Pasig City
 TeleFax: 637-3158 637-4735

PRID-PS-08

JOB ORDER

(Non-Inventoriable Items)

Supplier **GILCOR PRINTING PRESS**
 Address **# 15 San Ponciano St. San Antonio Homes, Culiat, Quezon City**
 Tel.Fax No. **453-1836 455-0546**
 Supplier Registered with: **PHILHEALTH**

Work Order No. **14-02-012**
 Date: **February 28, 2014**
 Term of Payment: **On Account**
 Mode of Procurement: **Small Value Procurement**

Please deliver to this office within **10 working days** upon approval of the following

Note: Additional (5) working days upon approval of final sample/text.

NO.	QTY	UNIT	SERVICE DETAILS	UNIT PRICE	TOTAL AMOUNT
1	500,000	PCS	PRINTING SERVICES FOR TSeKap Specifications: Size : 4" x 8.5" Color: Full Colors Process: Offset Printing with varnish Stock: C2S # 100 Others: (2) side print	0.34	170,000.00
			LESS: EWT 2% 3,035.71 GMP 5% 7,589.29		170,000.00
					10,625.00
					159,375.00
			RIV # 14-0067 dtd. 02/12/14 Corporate Marketing Department		

Terms & Conditions:

1. All buses/coaster to be used shall be provided by the supplier/contractor and it shall be the supplier's responsibility to maintain such buses/coaster in good, safe, working order and in compliance with all laws and regulations applicable thereto.
2. All drivers must be appropriately licensed, competent, responsible individuals and shall be employees of the supplier. In the event of default, supplier shall be liable for any expense including but not limited to damages, attorney's fees and court cost.
3. Operate the service in accordance with the approved timetable;
4. Convey all participants who at the appropriate time are present at such place or places as specified in this Job Order;
5. The supplier should not sub-contract the whole or any part the service without prior written consent from the Corporation

Very truly yours,

ELY E. ROXAS

Administrative Officer III

Certified Budget Available:	Funds Available in the amount of:	Php170,000.00	APPROVED:
CORAZON M. TABULAO Fiscal Controller III	LILIA R. GARRIDO Fiscal Controller III		LEILA S. TUAZON OIC, HEAD - SBAC HEAD OF THE AGENCY or Authorized Representative
Within the COB: 100% - ARITH. FY 2014 Expense Code: 7670 / MFD: OAKS Budget: \$ 170,000 / PPA: OAKS Remarks: For PHILHEALTH (2013)			
CONFORME: Signature over Printed Name and Position of authorized representative			Received copy of J.O.: 3-7-14 Date